Roadside Memorial Signage Permit Program Criteria

A sign must be requested by the victim's family or sponsor with the written consent of the victim's family.

Signs may only be installed on City of Brighton Roadways. Up to three names may be included on one sign with multiple victims.

No sign shall be installed on Interstate Highways (i.e. I-25, I-76 etc). An alternative sign location for interstate fatalities may be considered on a State highway or City Street near the crash location, as determined by the City.

Applicant shall pay the City of Brighton the applicable permit fee to partially cover fabrication, installation, maintenance and removal costs. Payment is due after the City approves the application.

The City will fabricate, install and maintain the sign for six years from the date of initial installation.

The City will return the sign to the family after six years.

The following additional special requirements for "Don't Drink and Drive" signs for fatal alcohol/drug (DUI) related crashes apply and shall be supplied by the applicant: There must be a conviction of the driver involved in a fatal crash who was in violation of Colorado DUI laws, or a toxicology report must show the victim driver to have been in violation of Colorado's DUI laws and only with the permission of the crash victim's family members.

Program information is available online at http://www.brightonco.gov/DocumentCenter/View/9418 or from the City of Brighton, Street Department, 1901 East Bridge Street, Brighton, Colorado 80601 or by calling the Street Department at 303-655-2034 or 303-655-2082.

City of Brighton - Roadside Memorial Sign Application (Please fill in on-line and print)			
Name of person or group			
applying for sign:	Daytime phone number:		e-mail address:
Mailing address: City:			State: Zip
Date of Fatal Crash:	Location of Crash (Street, hundred block)		County
Victim's Name(s) (as they should appear on the sign)		Victim's name(s) (as they appear on the accident report	
1.		1.	
2.		2.	
3.		3.	
Investigating Law enforcement agency:		Name of the Driver on the accident report:	
Roadside memorial Sign message to be included on the sign (please choose one):			
 DON'T DRINK AND DRIVE (Note specific requirements above) 			
 PLEASE DRIVE SAFELY (for any fatalities) 			
 PLEASE RIDE SAFELY (for motorcycle/bicycle fatalities) 			
 PLEASE BUCKLE UP (for fatalities where victim was not wearing a seat belt) 			
Preferred sign location (Please choose one):			
 LOCATION AS SHOWN ON THE ACCIDENT REPORT (Provided by City, or State) 			
 LOCATION AS SHOWN ON THE ATTACHED SKETCH (provided by applicant) 			
Victims immediate family signature(s):		Applicant signature:	
Date:		Date:	